

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	6		10-5-01
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date
Final	
Original	12/5
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36	✓
37	0
38	0
39	✓
40	✓
41	✓
42	✓
43	0
44	0
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Claim	Date
Final	
Original	51
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here